

UNITED STATES DISTRICT COURT
for the
District of Minnesota

QXMedical, LLC,

Plaintiff,

v.

Case No. 0:17-cv-01969-PJS-TNL

Vascular Solutions, Inc.,

Defendant.

SUMMONS IN A CIVIL ACTION

To: Vascular Solutions, Inc.

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) - or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) - you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Courtland C Merrill
90 S 7th St Ste 3600
Mpls, MN
55402

If you fail to respond, judgment by default may be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

*RICHARD D. SLETTEN, CLERK OF
COURT*

By:

The image shows the official seal of the U.S. District Court for the District of Minnesota. The seal is circular with an eagle in the center, holding a shield with stars and stripes. The words "U.S. DISTRICT COURT" are at the top and "DISTRICT OF MINNESOTA" are at the bottom. Overlaid on the seal is a handwritten signature in black ink, which appears to be "Katie Thompson".

Signature of Clerk or Deputy Clerk

Katie Thompson

Date of Issuance: June 8, 2017

Summons and Complaint Return of Service

Case No. 0:17-cv-01969-PJS-TNL

A copy of the Summons and Complaint has been served in the manner indicated below:

Name of Defendant Served: Vascular Solutions, Inc.

Date of Service: _____

Method of Service

____ Personally served at this address:

____ Left copies at defendant's usual place of abode with (name of person):

____ Other (specify):

____ Returned unexecuted (reason):

Service Fees: Travel \$ _____ Service \$ _____ Total \$ _____

Declaration of Server

I declare under the penalty of perjury that the information contained in this Return of Service is true and correct.

Name of Server: _____

Signature of Server: _____

Date: _____

Server's Address: _____

